

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02318

FILED
Jan 22, 2009
Secretary of State

Entity Name: BOCA GRANDE NORTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6020 BOCA GRANDE CSWY.
P.O. BOX 1043
BOCA GRANDE, FL 339211043

New Principal Place of Business:

6020 BOCA GRANDE CSWY.
BOCA GRANDE, FL 339211043

Current Mailing Address:

PO BOX 97
BOCA GRANDE, FL 339211043 US

New Mailing Address:

FEI Number: 57-0815327 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GRANDE ISLAND VACATIONS INC
6020 BOCA GRANDE CAUSEWAY
BOCA GRANDE, FL 33921 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: KRAMER, JONATHAN
Address: 9015 CLARK ST
City-St-Zip: DES MOINES, IA 50325

Title: TS () Delete
Name: FERGUSON, JEAN
Address: 11 LIVERMORE LANE
City-St-Zip: WESTON, MA 024931186

Title: PD () Delete
Name: LUSK, JERRY
Address: P.O. BOX 1018
City-St-Zip: BOCA GRANDE, FL 33921

Title: VD () Delete
Name: FLAHERTY, JOY
Address: 2505 E. 40TH ST.
City-St-Zip: DAVENPORT, IA 52807

Title: D () Delete
Name: MITCHELL, JOHN SR
Address: 901 NORTH MAIN
City-St-Zip: ANN ARBOR, MI 48108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP (X) Change () Addition
Name: KRAMER, JONATHAN
Address: 9015 CLARK ST
City-St-Zip: DES MOINES, IA 50325

Title: DS (X) Change () Addition
Name: FERGUSON, JEAN
Address: 11 LIVERMORE LANE
City-St-Zip: WESTON, MA 024931186

Title: DP (X) Change () Addition
Name: LUSK, JERRY
Address: P.O. BOX 1018
City-St-Zip: BOCA GRANDE, FL 33921

Title: V (X) Change () Addition
Name: FLAHERTY, JOY
Address: 2505 E. 40TH ST.
City-St-Zip: DAVENPORT, IA 52807

Title: DS (X) Change () Addition
Name: MITCHELL, JOHN SR
Address: 901 NORTH MAIN
City-St-Zip: ANN ARBOR, MI 48108

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERRY LUSK

DP

01/22/2009

Electronic Signature of Signing Officer or Director

Date